1411344

FORM D



UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

FORM D

NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D, **SECTION 4(6), AND/OR**

OMB APPROVAL						
OMB Number:	3235-0076					
Expires:						
Estimated average burden						

hours per response. 16.00

SEC USE ONLY

DATE RECEIVED

Sarial

UNIFORM LIMITED OFFERING EXEM	PTION
Name of Offering (check if this is an amendment and name has changed, and indicate change.) Portside NT	RECEIVED
Filing Under (Check box(es) that apply):	
A. BASIC IDENTIFICATION DATA	
1. Enter the information requested about the issuer	185/5
Name of Issuer (check if this is an amendment and name has changed, and indicate change.) Portside NT, LLC	02.103/3
Address of Executive Offices (Number and Street, City, State, Zip Code) 8775 Folsom Boulevard, Suite 200, Sacramento, CA 95826	Telephone Number (Including Area Code) (916) 381-1561
Address of Principal Business Operations (Number and Street, City, State, Zip Code) (if different from Executive Offices) 16400 Southcenter Parkway, Suite 502, Seattle, WA 98188	Telephone Number (Including Area Code) (206) 248-0555
Brief Description of Business Purchase, finance, development, operation, management and sale of commercial/industrial	real estate
	please specify): PROCESSED SEP 0.5 CONTROL
Month Year Actual or Estimated Date of Incorporation or Organization: 06 06 Actual Esti Jurisdiction of Incorporation or Organization: (Enter two-letter U.S. Postal Service abbreviation for Stat CN for Canada; FN for other foreign jurisdiction)	mated FINANCIAL

GENERAL INSTRUCTIONS

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).

When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where To File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

· ATTENTION -

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predictated on the filing of a federal notice.

A. BASIC IDENTIFICATION DATA										
2. Enter the information requested for the following:										
• Each promoter of the issuer, if the issuer has been organized within the past five years;										
• Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer.										
 Each executive officer and director of corporate issuers and of corporate general and managing pa 	• Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and									
 Each general and managing partner of partnership issuers. 										
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer D	rirector	General and/or Managing Partner								
Full Name (Last name first, if individual) Brynestad Family, LLC										
Business or Residence Address (Number and Street, City, State, Zip Code) 16400 Southcenter Parkway, Suite 502, Seattle, WA 98188										
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer D	lirector	General and/or Managing Partner								
Full Name (Last name first, if individual)										
Business or Residence Address (Number and Street, City, State, Zip Code)	<u></u>									
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer D	Director	General and/or Managing Partner								
Full Name (Last name first, if individual)										
Business or Residence Address (Number and Street, City, State, Zip Code)										
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer D	Director	General and/or Managing Partner								
Full Name (Last name first, if individual)										
Business or Residence Address (Number and Street, City, State, Zip Code)										
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer D	Director	General and/or Managing Partner								
Full Name (Last name first, if individual)	_									
Business or Residence Address (Number and Street, City, State, Zip Code)										
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer D	Director	General and/or Managing Partner								
Full Name (Last name first, if individual)										
Business or Residence Address (Number and Street, City, State, Zip Code)										
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer D	Director [General and/or Managing Partner								
Full Name (Last name first, if individual)										
Business or Residence Address (Number and Street, City, State, Zip Code)										

B. INFORMATION ABOUT OFFERING													
	Has the issuer sold, or does the issuer intend to sell, to non-accredited investors in this offering?										Yes	No 🔀	
2.	2. What is the minimum investment that will be accepted from any individual?								Yes	No No			
4 1	to the bar has been on will be not or given directly or indirectly any									K			
1	If a person to be listed is an associated person or agent of a broker or dealer registered with the SEC and/or with a state or states, list the name of the broker or dealer. If more than five (5) persons to be listed are associated persons of such a broker or dealer, you may set forth the information for that broker or dealer only.												
Full 1	Name (L	ast name	first, if indi	vidual)									
Busin	ness or F	Residence	Address (N	umber and	l Street, Ci	ty, State, Z	ip Code)			<u>.</u>			
Nam	e of Ass	ociated Br	oker or Dea	aler									
State	s in Wh	ich Person	Listed Has	Solicited	or Intends	to Solicit I	Purchasers						
1	(Check '	'All States	" or check	individual	States)				······································				States
ĺ	AL IL MT	AK IN NE	AZ IA NV	AR KS NH	CA KY NJ	CO LA NM	ME NY	DE MD NC	DC MA ND	FL MI OH WV	GA MN OK WI	MS OR WY	ID MO PA PR
	RI	SC	SD	TÑ	TX	ŪT)	[VT]	VA.	WA	<u> </u>			
Full	Name (I	ast name	first, if indi	ividual)									
Busi	ness or	Residence	Address (1	Number an	d Street, C	City, State, 2	Zip Code)			<u> </u>			
Nam	e of Ass	ociated Br	oker or De	aler									
			Listed Has										
	(Check	'All States	s" or check	individual	l States)					•••••	******	□ AI	States
	AL	AK	AZ	AR	CA	CO	CT	DE	DC	FL	GA MN	HI MS	ID MO
	IL MT	NE NE	IA NV	KS NH	KY NJ	LA NM	ME NY	MD NC	MA) ND	MI OH	ŎK.	OR	PA
	RI	SC	SD	TN	TX	UT	VT	VA	WA	WV	<u>wi</u>	WY	PR
Full	Name (I	Last name	first, if ind	iviđual)									
Business or Residence Address (Number and Street, City, State, Zip Code)													
Name of Associated Broker or Dealer													
States in Which Person Listed Has Solicited or Intends to Solicit Purchasers													
	(Check	"All State:	s" or check	individua	l States)						•••••	☐ AI	1 States
	AL IL MT	AK IN NE	AZ IA NV	AR (KS) (NH)	CA KY NJ	CO LA NM	CT ME NY	DE MD NC	DC MA ND	FL MI OH	GA MN OK	HI MS OR	ID MO PA
	RI SC SD TN TX UT VT VA WA WV WI									\overline{WY}	PR		

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

	Type of Security	Aggregate Offering Price	Amount Already Sold
	**	_{\$} 0.00	s 0.00
	Debt		\$ 0.00
	Equity	B	
	Common Preferred	€ 0.00	0.00 \$
	Convertible Securities (including warrants)	c 0.00	s 0.00
	Partnership Interests Other (Specify Membership Interest)	© 0.00	\$ 0.00
	Other (Specify Wielindership interest	0.00	s 0.00
	Total	Þ	
2.	Enter the number of accredited and non-accredited investors who have purchased securities in offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, ind the number of persons who have purchased securities and the aggregate dollar amount of purchases on the total lines. Enter "0" if answer is "none" or "zero."	licate	Aggregate Dollar Amount of Purchases
	Accredited Investors	_	\$ 0.00
	Non-accredited Investors		\$ 0.00
	Total (for filings under Rule 504 only)		\$ 0.00
	Answer also in Appendix, Column 4, if filing under ULOE.		
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all secured by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior of first sale of securities in this offering. Classify securities by type listed in Part C — Question	to the n 1.	
		Type of	Dollar Amoun
	Type of Offering	Security	Sold
	Rule 505	Security 0	Sold \$ 0.00
	Rule 505 Regulation A	Security 0 0	\$ 0.00 \$ 0.00
	Rule 505	Security 0 0	\$ 0.00 \$ 0.00 \$ 0.00
	Rule 505 Regulation A	Security 0 0 0 0 0	\$ 0.00 \$ 0.00
4	Rule 505 Regulation A Rule 504	Security 0 0 0 0 of the surer.	\$ 0.00 \$ 0.00 \$ 0.00 \$ 0.00 \$ 0.00
4	Regulation A Rule 504 Total a. Furnish a statement of all expenses in connection with the issuance and distribution of securities in this offering. Exclude amounts relating solely to organization expenses of the interpretation may be given as subject to future contingencies. If the amount of an expendit	Security 0 0 0 0 of the surer. ure is	\$ 0.00 \$ 0.00 \$ 0.00 \$ 0.00 \$ 0.00
4	Rule 505 Regulation A Rule 504 Total a. Furnish a statement of all expenses in connection with the issuance and distribution of securities in this offering. Exclude amounts relating solely to organization expenses of the introduction may be given as subject to future contingencies. If the amount of an expendit not known, furnish an estimate and check the box to the left of the estimate.	Security 0 0 0 0 the surer. ure is	\$ 0.00 \$ 0.00 \$ 0.00 \$ 0.00 \$ 0.00
4	Regulation A Rule 504 Total a. Furnish a statement of all expenses in connection with the issuance and distribution a securities in this offering. Exclude amounts relating solely to organization expenses of the in The information may be given as subject to future contingencies. If the amount of an expendit not known, furnish an estimate and check the box to the left of the estimate. Transfer Agent's Fees	Security 0 0 0 0 of the surer. ure is	\$ 0.00 \$ 0.00 \$ 0.00 \$ 0.00 \$ 0.00 \$ 0.00
4	Rule 505 Regulation A Rule 504 Total a. Furnish a statement of all expenses in connection with the issuance and distribution of securities in this offering. Exclude amounts relating solely to organization expenses of the introduced The information may be given as subject to future contingencies. If the amount of an expendit not known, furnish an estimate and check the box to the left of the estimate. Transfer Agent's Fees Printing and Engraving Costs	Security 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	\$ 0.00 \$ 0.00 \$ 0.00 \$ 0.00 \$ 0.00 \$ 0.00 \$ 0.00
4	Regulation A Rule 504 Total a. Furnish a statement of all expenses in connection with the issuance and distribution a securities in this offering. Exclude amounts relating solely to organization expenses of the in The information may be given as subject to future contingencies. If the amount of an expendit not known, furnish an estimate and check the box to the left of the estimate. Transfer Agent's Fees Printing and Engraving Costs Legal Fees	Security 0 0 0 0 of the surer. ure is	\$ 0.00 \$ 0.00 \$ 0.00 \$ 0.00 \$ 0.00 \$ 0.00 \$ 0.00 \$ 0.00
4	Rule 505 Regulation A Rule 504 Total a. Furnish a statement of all expenses in connection with the issuance and distribution of securities in this offering. Exclude amounts relating solely to organization expenses of the introduced The information may be given as subject to future contingencies. If the amount of an expendit not known, furnish an estimate and check the box to the left of the estimate. Transfer Agent's Fees Printing and Engraving Costs Legal Fees Accounting Fees	Security 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	\$ 0.00 \$ 0.00 \$ 0.00 \$ 0.00 \$ 0.00 \$ 0.00 \$ 0.00 \$ 0.00 \$ 0.00 \$ 0.00
4	Regulation A Rule 504 Total a. Furnish a statement of all expenses in connection with the issuance and distribution a securities in this offering. Exclude amounts relating solely to organization expenses of the in The information may be given as subject to future contingencies. If the amount of an expendit not known, furnish an estimate and check the box to the left of the estimate. Transfer Agent's Fees Printing and Engraving Costs Legal Fees Accounting Fees Engineering Fees	Security 0 0 0 0 control the surer. cure is	\$ 0.00 \$ 0.00 \$ 0.00 \$ 0.00 \$ 0.00 \$ 0.00 \$ 0.00 \$ 0.00

	C. OFFERING PRICE, NUMBE	R OF INVESTORS, EXPENSES AND USE OF	PROCEEDS	
	b. Enter the difference between the aggregate offering and total expenses furnished in response to Part C — Qu proceeds to the issuer."	estion 4.a. This difference is the "adjusted grounds and a second	 	\$
5.	Indicate below the amount of the adjusted gross proceeds of the purposes shown. If the amount for any check the box to the left of the estimate. The total of the proceeds to the issuer set forth in response to Part C	purpose is not known, furnish an estimate an le payments listed must equal the adjusted gro	id .	
			Payments to Officers, Directors, & Affiliates	Payments to Others
	Salaries and fees		🔲 \$. 🗆 \$
	Purchase of real estate			
	Purchase, rental or leasing and installation of machi	nery	🔲 \$	\$
	Construction or leasing of plant buildings and facili	ties	🔲 \$	s
	Acquisition of other businesses (including the value offering that may be used in exchange for the assets issuer pursuant to a merger)	of securities involved in this		
	Repayment of indebtedness			
	Working capital		S 0.00	
	Other (specify): 100% of capital to be contributed	by the Members, as needed; no initial	<u>\$</u> 0.00	S 0.00
	capital contribution		_	
			🗌 \$	_ 🗆 \$
	Column Totals		🗆 \$ <u>0.00</u>	s 0.00
	Total Payments Listed (column totals added)	_	.00	
Г		D. FEDERAL SIGNATURE		
sis	e issuer has duly caused this notice to be signed by the u nature constitutes an undertaking by the issuer to furn information furnished by the issuer to any non-accre	ish to the U.S. Securities and Exchange Comr	mission, upon writt	ule 505, the followin en request of its staf
Īss	uer (Print or Type)	Signature	Date	<u> </u>
	ortside NT, LLC	Natasha Zaharov	8/27	2007
Na	me of Signer (Print or Type)	Title of Signer (Print or Type)		
Na	tasha Zaharov	Attorney, Panattoni Law Firm		

END

- ATTENTION -

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)